

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | Ju | | 6/21/00 |
| O.I.P.E. CLASSIFIER | | 8 | 6-26-00 |
| FORMALITY REVIEW | | 67607 | 8-25-00 |
| RESPONSE FORMALITY REVIEW | | 67807 | 1-20-00 |

INDEX OF CLAIMS

| | | | |
|---|----------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — | (Through numeral) Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Final | Original | Date |
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| 1 | ✓ | ✓ | 6/21/00 |
| 2 | ✓ | ✓ | 6/21/00 |
| 3 | ✓ | ✓ | 6/21/00 |
| 4 | ✓ | ✓ | 6/21/00 |
| 5 | 0 | 0 | |
| 6 | 0 | 0 | |
| 7 | 0 | 0 | |
| 8 | 0 | 0 | |
| 9 | 0 | 0 | |
| 10 | ✓ | ✓ | 6/21/00 |
| 11 | ✓ | ✓ | 6/21/00 |
| 12 | ✓ | ✓ | 6/21/00 |
| 13 | ✓ | ✓ | 6/21/00 |
| 14 | 0 | 0 | |
| 15 | 0 | 0 | |
| 16 | 0 | 0 | |
| 17 | 0 | 0 | |
| 18 | 0 | 0 | |
| 19 | ✓ | ✓ | 6/21/00 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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